



CDSS Quality Assurance (QA) Monitoring Review Process Overview

Fiscal Year (FY) 2019/20





Materials Needed

Please print the following materials before proceeding with the webcast at www.cdss.ca.gov/inforesources/IHSS/Quality-Assurance/Monitoring

1. An Agenda
2. The Case Review Methodology
3. The CDSS Case Review Tool
4. The CDSS Home Visit Checklist
5. The CDSS Monitoring Review Summary
6. Monitoring Review Time Frames



Webcast Agenda

- Section 1: History and Authority of QA
- Section 2: Purpose of the Monitoring Review
- Section 3: State and County Responsibilities
- Section 4: The Monitoring Process for FY 2019/20
- Section 5: On-site Monitoring Review
- Section 6: Post-review Activities
- Section 7: Monitoring Review Time Frames



Section 1

History and Authority of QA



History of IHSS Monitoring

- In 1993, CDSS established an IHSS monitoring function
- 2004 Quality Assurance Initiative:
 - Establishment of county QA function
 - State oversight of county QA activities



History of IHSS Monitoring

- 2004 Independence Plus Waiver (IPW)
- 2009 IHSS Plus Option (IPO)
- 2013 Community First Choice Option (CFCO) approved
- Other program changes



Authority for CDSS Monitoring

- CDSS Quality Assurance Monitoring Review – Welfare and Institutions Code (WIC) § 10600 and 10603
- County's QA program and the IHSS needs assessment process as mandated by WIC § 12305.70 and 12305.71
- CFCO – California State Plan Amendment (SPA) 13-007



Section 2

Purpose of the Monitoring Review



Purpose of the Monitoring Review

1. Ensure uniformity in the authorization of services
2. Ensure accurate and timely assessments of needs
3. Partner with counties and provide technical assistance related to systemic issues identified during the review
4. Ensure that county QA activities are aligned with their Quality Assurance/Quality Improvement (QA/QI) plan
5. Ensure quality of services provided to applicants and recipients



Section 3

State and County Responsibilities



State Responsibilities

- Notify the counties of the review dates
- Analysis of Case Management, Information, and Payrolling System (CMIPS) data
- Review County Policies & Procedures



State Responsibilities

Case Selection - Sample Size

- Very small (1-25) = All cases reviewed
- Small (26-999) = 25 cases reviewed
- Medium (1,000-9,999) = 40 cases reviewed
- Large (10,000-49,999) = 60 cases reviewed
- Very Large (50,000+) = 250 cases reviewed



State Responsibilities

Case Selection - Methodology

- 40% = Previously Reviewed by County QA
- 30% = Severely Impaired, Living Alone
- 30% = Anomalies Identified in CMIPS
- 5-20= Denied Cases



County Responsibilities

- County Organizational Chart
- Intake Policy & Procedures
- Request for Order and Consent - Paramedical (SOC 321)
- Worksheets used to assess for Medical Accompaniment and Wait Time
- Fair Labor Standards Act (FLSA) and Provider Enrollment



County Responsibilities Continued

- A list identifying cases selected by county QA
- Desk and Home Visit review tools



County Responsibilities

Mandatory Forms:

- SOC 873 Healthcare Certification
- SOC 827/864 Back-up Plan/Risk Assessment
- SOC 332 Recipient/Employer
Responsibility Checklist
- SOC 426A Recipient Designation of Provider
- SOC 295 Application for Social Services



County Responsibilities

Other Forms, when applicable:

- SOC 321 Request for Order and Consent – Paramedical Services
- SOC 821 Assessment of Need For Protective Supervision
- SOC 825 Protective Supervision 24-Hours-A-Day Coverage Plan
- SOC 450 Voluntary Services Certification
- SOC 839 IHSS Designation of Authorized Representative



Section 4

The Monitoring Process for FY 2019/20



Monitoring Case Review Tool Changes for FY 2019/20

- SOC 295 – Completed Sexual Orientation Gender Identity (SOGI) requirements
- SOC 839 – IHSS Designation of Authorized Representative, when applicable



Section 5

On-site Monitoring Review



Entrance Conference

- CDSS Monitoring Review purpose and focus
- Trend Charts
- Review Methodology
- The Case Review Tool and Summary
- The Rebuttal Process
- Training Academy Staff Attendance

Statewide Trend Comparison Charts



- Authorized Caseload
- Severely Impaired % of Caseload
- Protective Supervision % of Caseload
- Paramedical Hours Per Paramedical Case
- Authorized Hours Per Case
- FLSA Violations - Override Percentage
- Initial Assessments – Point-in-Time
- Medical Accompaniment Cases
- Medical Accompaniment Hours per Medical Accompaniment Case
- Overdue Reassessments



County, Medium Counties and Statewide Trend Comparisons

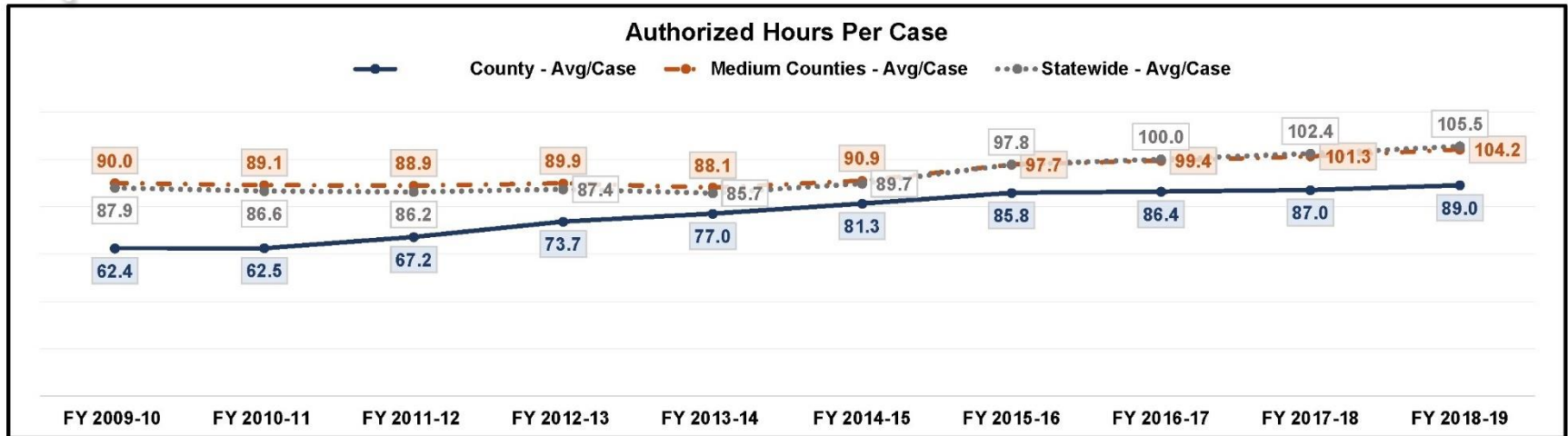


Chart Description Authorized hours (e,p,l) divided by the average county authorized caseload.

Fiscal Year	County - Avg/Case	Medium Counties - Avg/Case	Statewide - Avg/Case
FY 2009-10	62.4	90.0	87.9
FY 2010-11	62.5	89.1	86.6
FY 2011-12	67.2	88.9	86.2
FY 2012-13	73.7	89.9	87.4
FY 2013-14	77.0	88.1	85.7
FY 2014-15	81.3	90.9	89.7
FY 2015-16	85.8	97.7	97.8
FY 2016-17	86.4	99.4	100.0
FY 2017-18	87.0	101.3	102.4
FY 2018-19	89.0	104.2	105.5

SOURCE: Caseload Management, Information and Payrolling System (CMIPS). FY data is an average of each month of fiscal year (July to June).
Current FY avg reflects thru 6/30/19 data.



Case Review Tool Highlights

- Timeliness of Assessments
- Hourly Task Guidelines (HTGs) Exceptions
- Functional Index (FI) Rankings
- Medical Accompaniment and Wait Time
- Protective Supervision
- Unmet Need
- Paramedical Services



County QA/QI Functions

- County QA Desk Reviews
- County Home Visit Review(s)



Home Visit(s)

- State QA accompanies county QA on home visit(s)
- The number of Home Visits is based on county size
- Home Visit Checklist Tool



Remediation

Maximum timeframes for:	A finding for “Immediate Action Required”	A finding of “Action Required”
Contesting	3 days	10 days
Resolving	10 days	45 days



Exit Conference

- Draft Monitoring Review Summary
- Technical Assistance
- Best practices



Common Review Findings

- FI ranking is inconsistent with case documentation
- Incorrect application of the HTGs
- Medical Accompaniment and Wait Time is assessed and authorized incorrectly



Section 6

Post-review Activities



Post-Review Activities

- County rebuttal(s)
- Final Summary Letter



Post-Review Remediation

Activity	Timeframes
Cases with no rebuttals	Complete corrections in CMIPS within 60 days of Exit Conference
Cases with rebuttals that were not accepted	Complete corrections in CMIPS within 90 days of Exit Conference

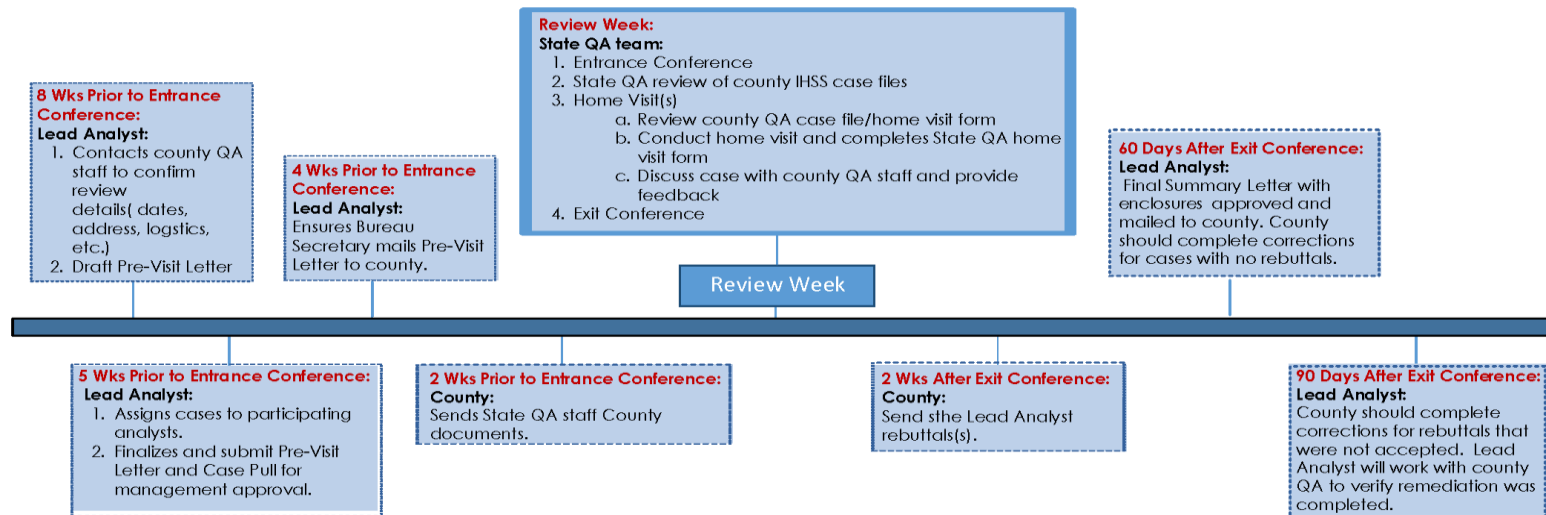


Section 7

Monitoring Review Time Frames

Monitoring Review Time Frames

California Department of Social Services - In-Home Supportive Services Monitoring Review Timeframes





For Further Information on QA Monitoring Process

- County Welfare Directors Association (CWDA) report: “In-Home Supportive Services, Past Present, and Future”
- Senate Bill 1104 (Ch. 229, Statutes of 2004)
- All County Information Notice (ACIN) No. I-69-04
- ACIN No. I-24-05
- ACIN No. I-64-05
- ACIN No. I-53-18
- All County Letter (ACL) No. 06-35
- ACL No. 10-39
- ACL No. 13-23
- ACL No. 13-110
- ACL No. 18-77
- ACL No. 18-59
- MPP § 30-702
- SPA Number 13-007



THANK YOU!

If you have any questions about this Webcast or the IHSS QA Monitoring process, please send them to IHSS-QAMU@dss.ca.gov for assistance.